

An Interactionist Perspective on Understanding Gender Identity in Art Therapy

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Abstract

This paper applies social interactionism to gender identity issues as addressed in the art therapy literature and within interview data collected from art therapists working in the field. The findings revealed that perceptions from practicing art therapists differed from ideas put forth in the art therapy literature about gender traits that influence a field comprised mostly of women. The author concludes that for the advancement of art therapy, art therapists need to accept and value all gender characteristics within the field.

Introduction

A discourse on being a man in a predominantly women's profession has emerged in the field of art therapy. There have been focus groups for men at the national conference and, more recently, a special issue on men in *Art Therapy* (Vick, 2007). As a male art therapist, I have never been an apologist or an advocate for my masculine identity. Until recently, it has always been a tangential issue addressed anecdotally—explored as a student in graduate school, mulled over when a woman colleague asks what it is like to be a man in the field, and as a man teaching a classroom full of women. Nevertheless, rather than present my personal reflections, this paper will evaluate data on gender roles in art therapy as perceived by some members of our vocation. I will apply social interactionism as a framework for understanding gender identity and roles, and explore how gender has been discussed in the art therapy literature and within data that was collected for a study on the nature of an art therapist's work. Finally, I will attempt to put into perspective the issue of being a man in a predominantly women's field.

Social Interactionism

Social interactionism as a model for identity formation emerged at the turn of the 20th century from the work of James, Cooley, Dewey, Mead, Blumer, and others. James claimed that the social self is developed through the interaction of the individual and social groups (James, 1890/1918). Cooley (1964) and Dewey (1930) believed that interdependence exists between the social environ-

ment and individuals. People interpret what others see in them by observing and reflecting on their interactions; the self emerges as the individual responds to how others have acted toward him or her (Hall, 1987).

Mead (1964) believed that the self's interactions tend to define situations and that an individual's identity emerges from the "process of social experience and activity... [that] develops in the given individual as a result of his relations to that process as a whole and to other individuals within that process" (p. 199). However, the self also interacts with an individual's own thoughts and ideas through self-reflection (Mead, 1964). This notion, that the self is created and defined through interactions with ideas, is similar to how Blumer (1969) explained interactionism. He claimed that in an interaction a person will interpret the gestures of others and then will act upon these interpretations. He also stressed the importance of the interaction that takes place between people and objects. Objects have meaning for people, yet meaning is "not intrinsic to the object but arises from how the person is initially prepared to act toward it" (Blumer, 1969, pp. 68-69).

For Blumer (1969), objects include ideas and thoughts. The sharing and interpretation of such objects are what define the action and interaction. Thus, because interactionism allows that meaning emerges from the interaction between people and objects, meanings and interpretations are social products. Through these interpretations, a person's roles within society are defined, as is the person. Meanings and interpretations are social products and constructs, as are gender identities.

Gender and Interactionism

It is important to define some terms used in this article. I use *gender* to mean the classification of people as feminine and masculine. This classification is culturally constructed and is dependent on, but different from, *sex*. Whereas gender relates to culture, sex relates to biology and generally divides individuals into the categories of male and female. *Gender identity* here refers to a person's self-identification: one's inner sense of one's sex and of the generated image one presents to the world.

Interactionism has been used to clarify and address the creation and confirmation of gender identity. Because gender is socially constructed, gender identities are socially defined terms (Denzin, 1992). "As interactional events enact gender relations over diverse contexts, they confirm or undermine gender beliefs. Thus, interaction plays an important role in sustaining or modifying the gender sys-

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tem” (Ridgeway & Smith-Lovin, 1999, p. 192). The binary definition of gender identity is maintained through societal consensus. In day-to-day interactions, categorizing by sex is perceived as a natural social process even when other hierarchical structures exist, such as between teacher and student (Brewer & Lui, 1989). However, gender roles and identities are not assigned and maintained only by sex and may include personality characteristics as well. To be male, therefore, is to maintain a masculine gender identity, by having a masculine sense of self and presenting that masculinity to the world. As Stets (1995) wrote, “role identities (the social structure) may be linked to person identities (the self) through a common system of meanings” (p. 147). These gender identities help to maintain the roles provided by socially derived perceptions of gender.

Many writings that address interactionism in the context of gender focus on the construct of power, often on the stratification of masculine power over feminine (Denzin, 1992; Garcia, 2003; Paechter, 2006). But as Stets (1995) wrote, “there is much more to the power process than whether one is male or female. What is more critical is one’s gender identity...gender identity rather than gender becomes the critical component in the power process” (p. 142). This identity is built upon a feedback loop that is reinforced within and through the components of the interacting system under which lies the gender standard (Burke, 1991). Stets asserted:

While a more masculine gender identity brings forth perceptions and behavior that are more controlling, that very control reinforces a masculine identity...the identity process is a feedback process of comparing one’s perceived identity in a situation with one’s desired identity or identity standard. (1995, p. 132)

Those who identify as being more masculine likely perceive themselves as having more control than those who identify as feminine. What is more, in certain contexts, those perceived by others as more masculine may be granted more authority or viewed as being in charge. After all, the systems in which people belong also play a significant role in reinforcing gender identities. In his description of the “gendering” of organizations, institutions, and relationships, Hall (2003) observed that “gender is produced and reproduced in the ways in which organizations are structured, institutions cultured, and relationships practiced” (p. 41).

Thus, gender characteristics are not always the defining attribute of assigned definitions of character and power. Gender hierarchy is subject to surrounding contexts and not simply the notion that only men have power. For example, “when the task is stereotypically feminine (e.g., child-care), the theory predicts that women will have a slight power and prestige advantage over men” (Ridgeway & Smith-Lovin, 1999, p. 199). The tasks themselves, and the language that defines these tasks, may be perceived as masculine or feminine. A person may be measured by society against the very occupational traits he or she has adopted in order to determine suitability for particular occupational responsibilities. As a result, views on how appropriate a per-

son is seen in a given occupational role tend to justify the title and perceived characteristics of the person within that role. If someone has an occupation that runs counter to expectations about his or her gender, the very name of the gender is used to modify the occupational label (Averett & Heise, 1988). For example,

While a “female judge” is a very powerful, grave person, the addition of the modifier “female” will make her seem a little more positive, less powerful, and more expressive than her male counterparts who occupy the unmarked identity [“judge,” because we assume “male”]. (Ridgeway & Lovin-Smith, 1999, p. 205)

Consequently, for men in the field of art therapy, the term art therapist may be modified by the term “male”; they become the “male art therapist.” This, in turn, engenders a new system of expectations and characteristics.

Gender in Art Therapy

It is redundant to point out that art therapy is a female-dominated field. The last several demographic reports for the American Art Therapy Association have female art therapists outnumbering their male counterparts on an average of slightly more than 10 to 1 (Elkins & Stovall, 2000; Elkins, Stovall & Malchiodi, 2003; Pearson, Walker, Martinek-Smith, Knapp, & Weaver, 1996). Twenty years ago, Johnson (1989) reasoned that art therapy is attractive to women due to their natural nurturing and creative characteristics. He also surmised that the difficulties that art therapists have in promoting professional identity could be due to how society views women:

All of our efforts as creative arts therapists to document our contributions...are constrained by the greater value our society places on control versus empathy, external versus internal concerns, managing versus caring, aggression versus understanding, business versus the arts...men versus women. (p. 236)

Here, constructed notions of femininity and masculinity are not only underscored but are, in fact, blamed for how our field is subordinately viewed by other professions.

In a study on why art therapists choose art therapy as a career (Oppegard, Elkins, Abbenante, & Bangle, 2005), only 7% of the respondents were male. Interestingly, but not further analyzed by the researchers, was that on average, males reported being in the field longer ($M = 25.6$ years, $SD = 6.1$) than did females ($M = 22.1$ years, $SD = 4.4$) a statistically significant difference ($t = -2.5$, $p = .02$) (p. 93). This finding may be linked to data on higher salaries reported by more men than women (Elkins, Stovall, & Malchiodi, 2003). Why men earned higher salaries was not investigated, however. It may be that men earned higher salaries due to workplace inequities or because they pursued higher paying positions within the workplace facility.

Despite the tendency of some to lament that art therapy is not accepted as a serious profession because it is a woman’s profession among other fields in health care that are

male dominated, many art therapists use perceptions of gender to define the field. In fact, some reinforcement of these socially assigned gender characteristics can be found in the art therapy literature. Wadeson (1989), for example, stressed that art therapists should not succumb to the pressures of the masculine world placed onto the female-dominated art therapy profession. She believed that in response to the demands to align themselves with male-dominated health-professions, "art therapists often feel pressured to analyze, interpret, diagnose, and assess" and that "we often feel the need to 'prove' the merits of our work by producing research that justifies our clinical interventions" (p. 327). By equating masculinity with the tendency to quantify, and in essence to be more scientific, Wadeson asserted that art therapists run the risk of losing their desired feminine traits: spontaneity, caring, and nurturance. "In the clinical arena, we care and connect (female) rather than judge and apply rules. And yet we are often pressured to do the latter: to assess (i.e., judge according to rules—male)" (p. 329). Gender stereotypes are reinforced and art therapists are warned to choose one gender identity over another, in this case, the feminine over the masculine.

A few years later, Burt (1996) stressed that it was through disregarding these identities and not acknowledging feminine identities, that art therapists run the risk of losing their own professional identity. Describing hard science as a characteristically masculine approach to research, Burt asserted that the pursuit of validity by such means would cause a loss of identity. Referring to the Diagnostic Drawing Series assessment (Cohen, Mills, & Kijak, 1994) as an example of a gender-biased research method, Burt wrote that the DDS research "demonstrates what happens when we try to fit art therapy into patriarchal paradigms like the medical model; we lose the value of the art therapy process and further elevate the medical model's position of power" (p. 14). Her argument was that only through activism via feminist art therapy research could the field break free of masculine constraints.

When Moon (2000) considered the question of whether art therapy is an idea or a profession, she relied on a feminist perspective to frame her response. She stated that a group identifies itself from within, based upon its own distinctiveness. Characteristically, art therapists have a desire to provide therapeutic services, have an interest in art, and are generally female. Moon stressed that these characteristics place the field in a minority position and warned that such a position forces art therapists to conform to an external concept of professionalism (presumably defined by the majority position, that is, the masculine ideal). Art therapists should value these characteristics, Moon wrote, and use them to create a distinctive professional identity, one that values multiple ideas:

Along with being wary of aspects of professionalism evident in the dominant culture, it is also essential that we identify the aspects of our essential identity we wish to preserve and promote. This is particularly important in relation to our minority status as women and as artists within a male-dominated, linear, scientific paradigm of professionalism. A feminist, aesthetic paradigm of professionalism values such qualities as

flexibility, creativity, inclusion, openness to interdisciplinary pursuits, being in relationship, engagement with ordinary life, emotionality, and artistic sensibilities. (p. 9)

Moon urged the profession to reverse its "gate-keeping" ways, implying that territoriality might be the cause for the "small percentage of art therapists of color, the differences in accessibility to the profession based on socioeconomic class, and even the small percentage of males" (p. 9). Moon's argument reverses the dominant paradigm of professionalism adopted by art therapists, which she thought was the basis for a gate-keeping mentality and may actually increase the number of men in the field (a desired notion from her perspective). This is in contrast to Agell who, in an interview a decade earlier, indicated that she was "unconcerned that only six percent of the practitioners are men" and wished "to see the field become a women's field, with power and prestige" (Fago, 1989, p. 57).

Such ideas of feminine ideals and masculine pressures are prevalent in the literature regarding art therapists' professional identity. How these issues affect the daily work of the art therapist is undocumented. Does gender identity play a role in the work lives of art therapists? How is the social construct of gender identity viewed by those who are working in the field? The following section of this article discusses responses from art therapists who were interviewed as part of a qualitative study on the nature of an art therapist's work (Gussak, 2001). These data were reviewed to determine whether gender was a concern for the participants of the study, and if so, how gender disparity may be playing out by those working in the field.

Field Observations

Five art therapists were interviewed and observed in their workplace for 1 week each. Six other art therapists participated in the study through semi-structured interviews only. All but 2 of the participants were women; 1 man was observed and 1 man was interviewed. Although it was not the intention of the study to ascertain perspectives on gender identity, some of the responses that emerged spontaneously included concern for gender. Unfortunately, these issues did not always emerge and only 3 of the participants discussed gender directly. The following section discusses these gender issues.

Fern (pseudonym), a 50-year-old woman who had been working in the field for about 7 years, initiated a discussion on gender when she described the profession of art therapy as a "stepsister of other professions." Asked to expand on this, she said that the profession is not well recognized, is comprised primarily of women, and has a secondary status compared to health care fields that are mostly "dominated by men." When pressed further, she reconsidered this thought. She observed that social work, a profession that she considered well recognized, is also primarily comprised of women. She stated, however, "given the pay...the doctors tend to be paid more than the social worker [and thus] we tend to see the male in the doctor role and the female in the social work role."

Fern was unable to speculate on whether the doctor got paid more because the doctor, she assumed, was a man, or whether a man might become a doctor in order to be paid more. Regardless of her inability to explain why this may be, Fern did indicate her belief that clearly more women entered the field of art therapy because of a natural tendency toward creativity. However, she noted, money and gender are connected in the field of fine art as well:

...but then there is the gender thing of [thinking] of artists and art types as being female; of course, interestingly enough, when we get to the really high dollar artists, they have almost probably been male until very recently with the feminist movement [and] with more women coming on the scene with more prominence rather than just local acceptance. But even so, that is still very much dominated by male artists.

Thus, from Fern's socially constructed perspective, gender influences the prestige and recognition of a professional, and this higher status is reflected in the size of his or her salary.

Predictably, issues of gender identity emerged in the interviews of the two men in the study, Carl and Nate (pseudonyms), but how they responded was somewhat unexpected. At the time of his interview, Nate had been in the field for about 10 years. A man in his late 40s, Nate was an art therapist/clinical director of a private psychiatric hospital. Nate worked with the adolescents and children in the facility. Like Fern, Nate believed that salary and prestige influenced the gender discrepancy in art therapy. When asked why there were more female art therapists than male, Nate stated that he'd never really thought about why, only that it was clear that "it's really gender oriented": men will pursue a medical or psychologist identity "rather than recognizing the impact" of the art. In essence, Nate believed that how the profession is viewed societally impacts those who become art therapists. From his perspective, men have more of a tendency to enter "hard sciences" and art therapy is not viewed as such. He thought that art therapists needed to be aware of the politics of breaking into a scientific field, and explained,

Psychology wasn't considered a science and [psychiatrists] never considered it a science for a long period of time because of the medical model concept; we're still trying to get in the same door and trying to promote the art. Recognizing [its] strength is one thing, trying to sell it is another.

Nate argued that because art therapy is not a hard science, it is not taken seriously in the larger field of mental health care. He believed this accounted for why fewer men are attracted to art therapy (but not why more women are attracted to it). Thus, from his perspective, the sociological system, not gender, creates disparities of salary and prestige. He further believed that the political ability to promote art therapy to other professions using a common language such as research would protect the profession. Interaction may cause the disparity, but a redefined social interaction through common language could promote an equal voice between the groups.

Carl was a new professional who worked as an art therapist in a drug and alcohol program. Among several discus-

sions that focused on his role in the field, one brought up his gender. Carl indicated that initially the prospect of being a man in a field dominated by women was not a concern for him, but became one while he was in graduate school and later as he entered the profession. Unlike Nate, Carl took the issue more personally, especially after he read Moon's (2000) article cited earlier. Carl mused: "But I'm a guy in art therapy too. So how can I have this—what's that perspective?—the aesthetic feminist perspective. I guess I can't have it because I'm not a feminist." When asked about what he was specifically referring to, Carl explained that it seemed that sometimes "they intentionally try to take guys out of the equation." He believed this was so because most art therapists are women and there is a strong current of feminine identity with respect to its perceived nurturing aspect. Perhaps, he mused, "being a female makes them become art therapists. And why do some males become art therapists? I don't know."

Carl tried to generalize why there were more women in art therapy, but eventually the issue became personal again as he focused on his own identity:

Carl: [When I was in] art classes, it was pretty even (men and women). But then all of a sudden you go to art therapy (pause)...and it's a bunch of women. What's that all about? I don't know.

Researcher: Did that surprise you?

Carl: A little bit. I never thought that being a male art therapist was a unique thing...it never crossed my mind.

Carl said that it was not until graduate school, and learning about the field through professional conferences, that he understood how unique he was. However, he did not have this unique identity while at work. Because he was the first art therapist at his facility, there was no prior benchmark established of art therapy being associated with women. Ironically, Carl felt more isolated and uniquely a man when around other art therapists than when at work. It seemed that Carl experienced the "gate-keeping" that Moon (2000) mentioned. This contextual relates back to interactionism. In an agency comprised of licensed drug and alcohol counselors, Carl was seen as the art therapist. In the art therapy field, Carl was identified as a "male art therapist." No doubt these societal interactions affected Carl's perception of his identity as a male, in addition to his perception of his identity as an art therapist.

It is important to mention in this latest analysis of these data that gender disparities were not an intention of the study. Had the study focused directly on gender and its impact on the art therapy field, it could have produced an artificial contrivance of such issues. What emerged instead was that gender seemed relatively unimportant in the daily work of these particular art therapists. Given equal opportunity to express their viewpoints on the work they did, none of the other participants in the study addressed gender disparities. Apparently, there were other concerns that affected their work lives. Generally, they all discussed the uniqueness of their work as art therapists, the problems with not having a strong professional identity, and the fact that they had to

explain what art therapy is on an almost daily basis. In other words, other issues took precedence for these art therapists.

Granted, other factors should also be considered when reviewing this data. The group was small and highly selective, and thus these findings should not be generalized to all art therapists. Furthermore, because the participants were not directly questioned about gender, it is not clear whether gender inequities existed at work but were not mentioned, or that gender simply was not a pressing issue among the members of this sample. Further inquiry is necessary to support these conclusions.

Value of Research

Because research has been identified with gender in the art therapy literature, I reviewed the interview data for corroborating references that equated research with masculinity. Several of the women participants, though neither of the two men, spoke to the need for research to validate art therapy. For example, Mary (pseudonym), an art therapist and former graduate program director who had been in the field since the late 1960s, stressed the importance of research but said that for the most part “nobody has really looked at what the art does”; there is “no really hard data” and “art therapists generally don’t know how to research.” Fern also discussed the importance of the research, especially in adding classes to the curriculum and teaching “a research approach that has some vigor to it.”

Bonnie (pseudonym), a 42-year-old art therapist working in the field for seven years, saw the call for research as an important stage of development for the profession so that art therapists could “authenticate our field with research.” She saw research that creates viable measurement tools, such as the work of Linda Gantt (see Gantt & Tabone, 1998), as most promising. Amy (pseudonym) also stressed the importance of gathering data through measurement, specifically through standardized assessments.

Debbie (pseudonym), a 45-year-old woman with 20 years of professional art therapy experience, indicated that much of her work in a short-term psychiatric facility received funding through a quantitative study sponsored by a pharmaceutical company. She credited the study with validating the work of the facility, and indicated that much valuable data was collected. Even Erin (pseudonym), a woman in her mid-40s who had been an art therapist since 1982, underscored the importance of research for the field. Although she did not enjoy doing research, Erin felt that it was important that she know how to read research in order to understand it.

Overall, although research was defined as a masculine concept in the literature—one to be avoided within the nurturing, creative paradigm—the women who were interviewed in this study found it to be a necessity. Regardless of whether or not research was considered “masculine” or “feminine” was beside the point; these women emphasized the need for research for how it would advance the field, and by extension, their own value in the workplace. It is interesting that this concern likely is gender related but that fact was not underscored by the participants.

Conclusion

The binary division of gender (and thus gender identities) into masculine and feminine, as discussed in this article, are socially constructed and defined within a group, network, or other context, and is maintained within societal and systemic interactions. Gender-defined tasks are hierarchical and situation-specific according to the type of work an individual or group is engaged in. Certain tasks are assigned gender characteristics within and by the larger sociological system in which a smaller group may find itself. For example, in a police force, where power and strength are valued over empathy and nurturance, men are granted higher status than women in the same police force (Garcia, 2003). Conversely, in a field where creativity and nurturance are valued, women may be perceived by society as more effective and important. The reinforcement of these socially contrived differences maintains the gender divide. Eventually, valuable characteristics are compromised when a group stresses differences in the hopes of finding and maintaining a safe place for a specific gender, rather than striving for gender equality. By emphasizing art therapy as a “feminine” field where women can maintain power and a strong identity, anything that is defined as masculine can become characterized as undesirable, and those who put forth an agenda viewed as masculine can be deemed unacceptable and disloyal to the larger group. As Carl discovered to his surprise, being a man in the profession of art therapy is viewed as unique, and he felt isolated only when in the society of other art therapists. Such feelings were not pervasive in his actual work environment.

In the art therapy literature, stereotypically feminine traits have been valued over many years, and a desire to reject those traits perceived as masculine has been stressed. Research is just one example. Rather than embrace the need for robust quantitative research to help validate art therapy within the mental health care system, some authors propose that art therapists need to embrace their nurturing and creative sides and not “give in” to the dominant empirical paradigm perceived as masculine. Yet when collecting perspectives of those working in the field, what emerged was that the female participants in the study expressed a desire for just such research.

Men in the field are just as accountable; they too must guard against perpetuating the gender divide. What began as a focus group at the national conference to explore men’s standing in art therapy could become divisive if mishandled. I have been supportive of such groups, as have many women, but it still raises the issue of whether or not we are perpetuating stereotypes that affect how our field is defined. Granted, just as not all women perpetuate these disparities, not all men are reacting to their minority status within the field. When Bouchard (1998) wrote about the field’s professional identity and its struggle to gain power, unlike Johnson (1989), he did not mention gender. Rather than succumb to this perspective, Bouchard relied on other theoretical constructs to explain the disparities that arise.

However, the answer is not to ignore gender. This article has scratched the surface of how gender stereotypes and

gender perceptions affect the art therapy profession, both internally and externally. The field will be strengthened if all gender characteristics are embraced. Furthermore, art therapists of all gender identities need to analyze how gender affects their perceptions of themselves and of their profession, and actively strive to counter dominant gender stereotypes surrounding them. I do not mean that we should completely reject the notion that art therapists' strong suits include being nurturing and creative. Rather, I mean that (among other things) we should fight the idea that being nurturing and creative is a strictly feminine trait. Through challenging our own gendered perceptions, as well as those of society, we can and will move forward as a profession.

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